

Fill in this information to identify your case:

Debtor 1	<u>Alkareem</u>	<u>Qadir</u>	<u>Logan</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern</u>		District of <u>Pennsylvania</u>
Case number (if known)	<u>25-10144-amc</u>		

☒ Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.  
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
<b>2.1 Internal Revenue Service</b> Priority Creditor's Name <b>Centralized Insolvency Operation</b> <b>PO Box 7346</b> Number Street <b>Philadelphia, PA 19101-7346</b> City State ZIP Code Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$90,150.00</b>	<b>\$3,400.00</b>	<b>\$86,750.00</b>

Debtor 1 Alkareem Qaadir Logan Case number (if known) 25-10144-amc  
 First Name Middle Name Last Name

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
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<b>2.2</b> <u>Kimberly L. Thompson</u> Priority Creditor's Name <u>c/o Wendy Glazer</u> <u>2 Penn Ctr Ste 900</u> Number Street <u>Philadelphia, PA 19102-1742</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <u>Equitable Distribution of Assets</u>	<u>\$202,203.50</u> <u>\$202,203.50</u> <u>\$0.00</u>
<b>2.3</b> <u>Pennsylvania Department of Revenue</u> Priority Creditor's Name <u>Bankruptcy Division</u> <u>1 Revenue PI</u> Number Street <u>Harrisburg, PA 17129-0001</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	<u>\$1,069.21</u> <u>\$237.39</u> <u>\$831.82</u>

Debtor 1 Alkareem Qaadir Logan Case number (if known) 25-10144-amc  
 First Name Middle Name Last Name

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
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2.4	<b>Wendy Glazer, Esq.</b>	Last 4 digits of account number	<u>      </u>	<b>\$56,412.68</b>	<b>\$56,412.68</b>	<b>\$0.00</b>
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Priority Creditor's Name

When was the debt incurred?                     

**2 Penn Ctr Ste 900**

Number Street

**Philadelphia, PA 19102-1742**

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☒ Other. Specify Assigned Debt via Divorce Court Order/Contempt Penalty

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1

**Alkareem****Qaadir****Logan**Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
<b>4.1</b>	<b>American Heritage Federal Credit Union</b>	Last 4 digits of account number	<b>0 9 0 1</b>	<b>\$6,546.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Attn: Bankruptcy</b>		<b>10/1/2014</b>		
<b>2060 Red Lion Rd</b>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<b>Philadelphia, PA 19115-1603</b>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <b>CreditCard</b>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<b>4.2</b>	<b>American Heritage Federal Credit Union</b>	Last 4 digits of account number	<b>0 0 0 1</b>	<b>\$1,453.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Attn: Bankruptcy</b>		<b>10/1/2014</b>		
<b>2060 Red Lion Rd</b>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<b>Philadelphia, PA 19115-1603</b>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <b>Unsecured</b>		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

**Alkareem****Qaadir****Logan**Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.3</b>	<b>Capital One NA</b>	Last 4 digits of account number <b>6 3 3 2</b>	<b>\$1,005.00</b>
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Nonpriority Creditor's Name

**Attn: Bankruptcy****PO Box 30285**

Number Street

**Salt Lake City, UT 84130-0285**

City State ZIP Code

When was the debt incurred?

**9/1/2012**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **CreditCard**

Is the claim subject to offset?

☒ No☐ Yes

<b>4.4</b>	<b>Cavalry Portfolio Services</b>	Last 4 digits of account number <b>9 9 2 8</b>	<b>\$7,258.00</b>
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Nonpriority Creditor's Name

**Attn: Bankruptcy Attn: Bankruptcy****1 American Lane , Ste 220**

Number Street

**Greenwich, CT 06831**

City State ZIP Code

When was the debt incurred?

**7/26/2022**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **UnknownLoanType**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

**Alkareem****Qaadir****Logan**Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.5	<b>Eagle 1 Cu</b> Nonpriority Creditor's Name <b>Po Box 13160</b> Number Street  <b>Philadelphia, PA 19101</b> City State ZIP Code	Last 4 digits of account number <b>6 0 L 9</b> When was the debt incurred? <b>11/1/2022</b>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Unsecured</b>	<b>\$1,371.00</b>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.6	<b>Fingerhut Fetti/Webbank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b>  <b>6250 Ridgewood Road</b> Number Street  <b>Saint Cloud, MN 56303</b> City State ZIP Code	Last 4 digits of account number <b>6 0 1 4</b> When was the debt incurred? <b>8/1/2023</b>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>ChargeAccount</b>	<b>\$1,958.00</b>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

**Alkareem**

**Qaadir**

**Logan**

Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7	<b>Fulton Bank</b> Nonpriority Creditor's Name <b>Po Box 4887</b> Number Street  <b>Lancaster, PA 17604</b> City State ZIP Code	Last 4 digits of account number <u>1 0 1 4</u>  When was the debt incurred? <u>10/1/2014</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CheckCreditOrLineOfCredit</u>	<b>\$9,908.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.8	<b>Portfolio Recovery Associates, LLC</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b>  <b>P.O. Box 12914</b> Number Street  <b>Norfolk, VA 23541-0914</b> City State ZIP Code	Last 4 digits of account number <u>4 8 0 0</u>  When was the debt incurred? <u>6/1/2022</u>  As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UnknownLoanType</u>	<b>\$5,663.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p><b>Is the claim subject to offset?</b></p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

**Alkareem****Qaadir****Logan**Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.9</b>	<b>Syncb/Venmo</b>	Last 4 digits of account number	<u>4 8 8 9</u>	<b>\$957.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Attn: Bankruptcy</b>		<u>9/1/2023</u>		
<b>P.O. Box 965064</b>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
<b>Orlando, FL 32896-5060</b>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<b>4.10</b>	<b>Synchrony/PayPal Credit</b>	Last 4 digits of account number	<u>9 9 6 0</u>	<b>\$1,268.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Attn: Bankruptcy</b>		<u>6/1/2023</u>		
<b>PO Box 965064</b>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
<b>Orlando, FL 32896-5064</b>		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				



Debtor 1 Alkareem Qaadir Logan Case number (if known) 25-10144-amc  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

**4.11** Td Retail Card Services Last 4 digits of account number 6 8 9 7 \$148.00

Nonpriority Creditor's Name

MS BT

When was the debt incurred? 12/1/2018

POB 9475

As of the date you file, the claim is: Check all that apply.

Number Street

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Minneapolis, MN 55440

City State ZIP Code

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify ChargeAccount

Is the claim subject to offset?

- ☒ No  
☐ Yes

**4.12** Telecom Self-reported Last 4 digits of account number 0 B 1 1 \$254.00

Nonpriority Creditor's Name

Po Box 4500

When was the debt incurred? \_\_\_\_\_

Number Street

As of the date you file, the claim is: Check all that apply.

Allen, TX 75013

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify UnknownLoanType

Is the claim subject to offset?

- ☒ No  
☐ Yes

Debtor 1 Alkareem Qaadir Logan Case number (if known) 25-10144-amc  
 First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.13</b>	<b>Telecom Self-reported</b> <hr/> Nonpriority Creditor's Name <b>Po Box 4500</b> <hr/> Number                  Street <hr/> <b>Allen, TX 75013</b> <hr/> City                          State                          ZIP Code	Last 4 digits of account number <u>0</u> <u>5</u> <u>F</u> <u>C</u> <hr/> When was the debt incurred?        _____ <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Agriculture</u>	<b>\$25.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

  

<b>4.14</b>	<b>Telecom Self-reported</b> <hr/> Nonpriority Creditor's Name <b>Po Box 4500</b> <hr/> Number                  Street <hr/> <b>Allen, TX 75013</b> <hr/> City                          State                          ZIP Code	Last 4 digits of account number <u>1</u> <u>F</u> <u>4</u> <u>7</u> <hr/> When was the debt incurred?        _____ <hr/> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Agriculture</u>	<b>\$15.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

**Alkareem****Qaadir****Logan**Case number (if known) **25-10144-amc**

First Name

Middle Name

Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <u>\$0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b. <u>\$91,219.21</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$258,616.18</u>
	6e.	Total. Add lines 6a through 6d.	6e. <u>\$349,835.39</u>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <u>\$0.00</u>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$37,829.00</u>
	6j.	Total. Add lines 6f through 6i.	6j. <u>\$37,829.00</u>